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CONFIRMATION NO. 5251

<b>SERIAL NUMBER</b> 10/696,219	<b>FILING OR 371(c) DATE</b> 10/29/2003 <b>RULE</b>	<b>CLASS</b> 422	<b>GROUP ART UNIT</b> 1743	<b>ATTORNEY DOCKET NO.</b> 1159.1009-007	
<b>APPLICANTS</b> Herbert H. Loeffler, Arlington, MA; Steven A. Bogen, Sharon, MA;					
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/549,414 04/14/2000 PAT 6,673,620 which claims benefit of 60/130,171 04/20/1999					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/29/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>                    </u> <u>PSH</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 18 15	<b>INDEPENDENT CLAIMS</b> 7 4
<b>ADDRESS</b> 021005					
<b>TITLE</b> Fluid exchange in a chamber on a microscope slide					
<b>FILING FEE RECEIVED</b> 970	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		